



MILWAUKEE COUNTY
Behavioral
Health
Division

myAvatar™

Tips and Tricks



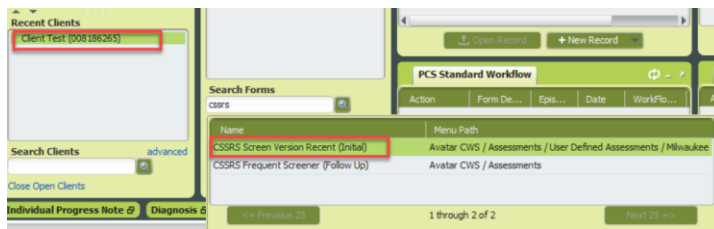
Suicide Risk Screening and Assessment Forms and Widget

This tip sheet covers **PCS/OBS and Inpatient Nursing and Psychiatry workflow** related to:

1. Updated (Safe-T) Suicide Assessment and Five Step Eval and Triage
2. New Columbia Suicide Severity Rating Screenings (CSSRS)
3. New widget to quickly view most recent Risk Level

PCS Workflow - Nurse

- Per policy, ALL patients who present to PCS will receive suicide risk screening using the Columbia Suicide Severity Rating Scale Screen Version-Recent that is completed by the triage nurse.
 - This information is documented in Avatar using the CSSRS Screen Version Recent (Initial) form and conveyed to the attending psychiatrist for review.
- A. **CSSRS Screen Version Recent (Initial)**- from the PCS/OBS Nursing Console, select the client and enter 'cssrs' in the Search Forms box. Select the CSSRS Screen Version Recent (Initial) form.



Select the appropriate episode of care and click OK.

The form opens in draft.

1. Enter the Assessment Date.
2. Document answers to questions 1 and 2 on the form.
3. Depending on the answers given to questions 1 and 2, follow the prompts and complete the form.
4. When finished, select Final.
5. Click Submit.

PCS Workflow- Psychiatrist

- The psychiatrist must then complete a full (SAFE T) Suicide Assessment and Five Step Eval and Triage assessment on EVERY patient seen in PCS as part of their psychiatric evaluation.
- A. **(SAFE T) Suicide Assessment and Five Step Eval and Triage-** from the PCS/OBS Psychiatry Console, select the client and enter 'safe' in the Search Forms box. Select the (SAFE T) Suicide Assessment and Five Step Eval and Triage form.

Select the appropriate episode of care and click OK.

The form opens in draft. Complete each section of the form documenting the steps below.

The Five Steps of the SAFE T:

1. Ask about suicide-specific risk factors (review what has already been documented via the CSSRS)
2. Assess for the presence of dynamic and static risk factors
3. Assess for the presence of protective factors
4. Determine risk level
5. Intervention and “Safety Planning”- document treatment plan to address/reduce current risk.

The Risk Level section is now color-coded to highlight the level of risk.

Inpatient Workflow- Nurse

- Per policy, ALL patients transferred to OBS or admitted to the inpatient units will receive suicide risk screening using the Columbia Suicide Severity Rating Scale Screen. The assigned nurse documents in Avatar using either the CSSRS Screen Version Recent (Initial) form for initial screens or the CSSRS Frequent Screener (Follow-Up) form for subsequent screens.

A. **CSSRS Screen Version Recent (Initial)**- from the IP Nursing Console, select the client and enter 'cssrs' in the Search Forms box. Select the CSSRS Screen Version Recent (Initial) form.

Follow the workflow above for PCS Workflow- Nurse, A. (pg.1) to complete the form.

B. **CSSRS Frequent Screener (Follow-Up)** is used to assess suicide-specific risk factors for EVERY patient a minimum of twice daily; once during the AM shift and once during the PM shift (and as

needed). From the IP Nursing Console, select the client and enter 'cssrs' in the Search Forms box. Select the CSSRS Frequent Screener (Follow-Up) form.

Select the appropriate episode of care and click OK.

The form opens in draft.

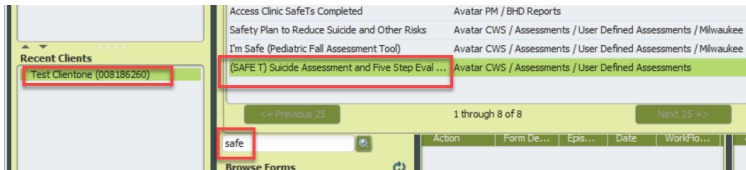
1. Enter the Assessment Date.
2. Document answer to question 2 on the form (Question 1 is removed for frequent assessments).
3. Depending on the answer given to question 2, follow the prompts and complete the form.
4. When finished, select Final.
5. Click Submit.

Inpatient Workflow- Psychiatrist

- Per policy, a (SAFE T) Suicide Assessment and Five Step Eval and Triage will be completed on ALL patients as part of the psychiatric admission assessment (completed within the first 60 hours of admission).
- Thereafter, a SAFE-T will be completed:

- Following any change in condition that impacts capacity to maintain personal safety.
- To support emergent initiation of suicide observation status (SOS).
- To support the reduction of an SOS.
- At the discretion of the attending Medical Staff.
- At discharge.

A. **(SAFE T) Suicide Assessment and Five Step Eval and Triage-** from the IP Psychiatry Console, select the client and enter 'safe' in the Search Forms box. Select the (SAFE T) Suicide Assessment and Five Step Eval and Triage form.



Select the appropriate episode of care and click OK.

The form opens in draft. Complete each section of the form documenting the steps below.

The Five Steps of the SAFE T:

1. Ask about suicide-specific risk factors (review what has already been documented via the CSSRS)
2. Assess for the presence of dynamic and static risk factors
3. Assess for the presence of protective factors
4. Determine risk level
5. Intervention and “Safety Planning”- document treatment plan to address/reduce current risk.

The Risk Level section is now color-coded to highlight the level of risk.

Risk level

☐ Low

☐ Moderate

☐ High

☐ Chronic high

If high

☐ Imminent

☐ Not imminent

If chronic high

☐ Imminent

☐ Not imminent

High Suicide Risk Suicidal ideation with intent or intent within past month (C-SSRS Suicidal Ideation #4 or #5) OR Suicidal behavior within past 3 months (C-SSRS Suicidal Behavior)

Moderate Suicide Risk Suicidal ideation without method, intent or behavior in past month (C-SSRS Suicidal Ideation #3) OR Suicidal behavior more than 3 months ago (C-SSRS Suicidal Behavior Lifetime) OR Multiple risk factors and few protective factors

Low Suicide Risk Wish to die or Suicidal ideation without method, intent, plan or behavior (C-SSRS Suicidal Ideation #1 or #2) OR Modifiable risk factors and strong protective factors OR No reported history of Suicidal ideation or Behavior

Rationale behind risk designation

Risk Level Widget (New)

The Risk Level widget provides quick access to the level of suicide risk as documented in Avatar. The widget is located on the Client Info Console and displays data from the most recently submitted (SAFE T) and CSSRS forms. A high risk level is noted in red.

Client Info

Client

DOB: 01/01/2005 **Age:** 15

Gender: Male

Race: No Entry

Ethnicity: No Entry

Language: No Entry

Religion: No Entry

Marital Status: No Entry

Address: No Address Entered

[Update Client Data](#)

Most Recent Legal Status:

BHD Legal Status History

Start Location	Legal Status	Court Number	End Date	BHD Legal Status
Episode	4	2020-10-06	4	2020-10-06
Date	High		High	

Risk Level

High

Note- the widget is minimized at the bottom of the console. Click on the small folder icon to maximize the widget on the console.

BHD Legal Status History

Start	Location	Legal Status	Court Number	End Date	BHD Legal Status
Episode	4	2020-10-06	4	2020-10-06	High

Risk Level

High